

A CASE OF LATERAL HEMIANOPSIA, WITH AUTOPSY.

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From the Clinical Records of the Bloomingdale Asylum, New York.

THE following case is of interest from the fact that the autopsy confirmed the diagnosis made before death, by Dr. E. C. Seguin, as reported by him in his "Clinical Study of Lateral Heminanopsia," in the JOURNAL OF NERVOUS AND MENTAL DISEASE for August, 1886. For the sake of completeness in the record Dr. Seguin's report of the case (p. 448) is again given here :

"GROUP II.—Cases of bilateral hemianopsia without hemiplegic symptoms. Lesion probably in one cuneus and adjacent gray matter.

"CASE I.—Male, æt. 52. Seen in consultation with Dr. H. H. Tinker, June 13th, 1882. Former health good, with exception of severe attack of migraine with vomiting frequently in the last ten years. Has had rheumatic manifestations, but positively denies any venereal disease.

"On February 23d, 1882, in a severe attack of migraine, after violent vomiting, suddenly found that he could not see on his left. Later in the day was completely blind. No paralytic phenomena or unconsciousness; for a week or ten days was ill with slight fever (100-102); after this, sight improved, but blindness to left remained.

"On April 20th, in the midst of a debate, without loss of consciousness, or paralysis, suddenly found himself 'mixing up his words.' Was able to write at once after attack. When seen later on same day by Dr. Tinker, there was slight hemiparesis. Speech has since greatly improved.

"*Examination.*—The only trace of right-sided paresis is a slight hanging of the lower part of the face; grasp normal; no hemianæsthesia; speech good. Pupils of the eye and

muscles normal; no lesion of fundus; with glasses for presbyopia reads easily; has typical lateral hemianopsia to left, with a concentric limitation of nasal half field of left eye. Heart large, but without murmur. Albumen in each of three samples of urine.

Pathological Diagnosis.—Two separate attacks of cerebral hemorrhage: 1st, with destructive clot in right cuneus, and a slight ecchymosis (?) in the left cuneus, (total obscuration of fields for a few days). 2d, clot in or near the speech centre of Broca in the left hemisphere."

The patient entered Bloomingdale Asylum December 1, 1885. The history of the case subsequent to the record given by Dr. Seguin, is as follows, the facts being obtained at time of his admission, from a letter from a brother of the patient: " . . . He was examined in June, 1882, by Dr. Seguin, who said that with rest for some months there was every prospect that he would so far recover as to be able to resume business in some moderate way, though Dr. S. said there had undoubtedly been a hemorrhage in the brain During the winter, 1882-3, he did transact some business. In April, 1883, while in a business office, he again suddenly found he could not speak. He went home and found when there that he had partially lost the use of his right arm. His speech was so thick as to be nearly unintelligible—very much worse than at present. From this also he rallied, but not completely. His speech has never returned altogether and his gait became somewhat feeble. But there was no mental failure that I could detect. He could discuss business matters clearly and well. There was perhaps some irritability and unreasonableness, but as to this there is no absolute certainty. He read a great deal and with enjoyment, and enjoyed travel.

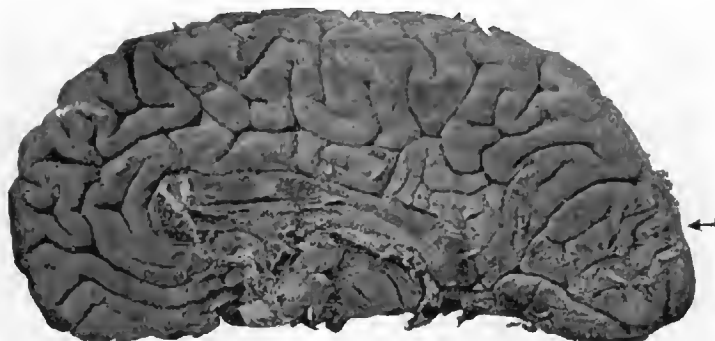
"On Thanksgiving Day (last week in November) 1884, he had a convulsion and was unconscious for some minutes. He had another some months after. From this time mental failure was observed, forgetfulness, irritability, persistence in unreasonable wishes and plans, etc. Still, up to May, 1885, he could listen intelligently to conversation and take part in it, enjoyed being read to, and remembered

past events. Since then the failure has been rapid. He has had another slight convulsion some months ago. At present his mental condition varies much at different times. He knows his friends, and even acquaintances, but forgets the events of each day. He is helpless in many ways, cannot feed himself nor attend to the calls of nature properly without assistance."

On admission to the Asylum he was quite feeble, walking with much difficulty and dragging his right foot painfully. The right arm was in a state of contracture; tongue tremulous and deviated to the right; pupils reacted normally, the right being possibly a little larger than the left; heart sounds normal. His mental symptoms presented nothing worthy of note, being simply those of dementia, secondary to cerebral hemorrhage. He was entirely unable to give any statement of his condition, simply answering "yes, yes" to every question.

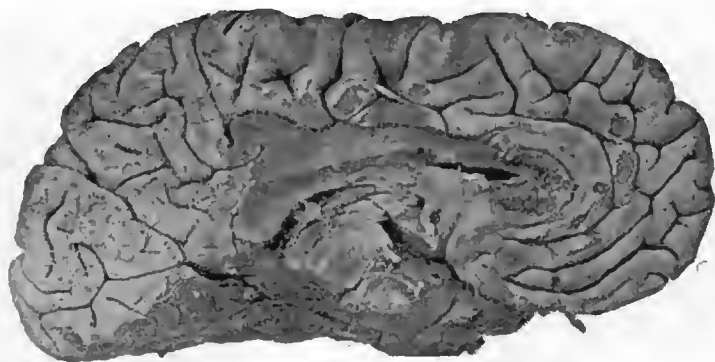
Mental and physical failure were rapid, and he died of exhaustion May 22d, 1886. The brain was removed the same day. The accompanying photographs of the two hemispheres were taken after the brain had been thoroughly hardened in Müllers fluid. The lesion in the right cuneus shows very plainly, the convolutions having undergone considerable atrophy. The photographs are on the same scale, thus showing that the right hemisphere, as a whole, had become smaller than the left. There is no visible lesion in the left cuneus, the convolutions retaining their normal size; the roughened surface in the photograph being due to an accidental abrasion of the hardened brain. No examination of the internal parts of the brain was made, as it was thought best to submit it to still further hardening in the hope of discovering any degeneration there might be in the optic tracts.

Macroscopic section of the right hemisphere showed no evidences of degeneration of the optic tracts visible to the naked eye.



RIGHT HEMISPHERE.

The arrow shows the lesion in the cuneus, with the marked atrophy and wasting of the convolutions.



LEFT HEMISPHERE.

The convolutions in the cuneus are shown to be full and of undiminished size.